

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

Serial No.

Filing Date

10/533,645  
10/533,645

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.		DEP.		IND.			IND.		DEP.		IND.	
	1	1						51					
2		1						52					
3		1	2					53					
4		1	1					54					
5		1	1					55					
6		1	1					56					
7		1	1					57					
8		1	1					58					
9		1	1					59					
10		1	1					60					
11		1	1					61					
12		1	1					62					
13		1	1					63					
14		1	1					64					
15		1	1					65					
16		1	1					66					
17		1	1					67					
18		1	1					68					
19		1	1					69					
20		1	1					70					
21		1	1					71					
22		1	1					72					
23		1	1					73					
24		1	1					74					
25		1	1					75					
26		1	1					76					
27		1	1					77					
28		1	1					78					
29		1	1					79					
30		1	1					80					
31		1	1					81					
32		1	1					82					
33		1	1					83					
34		1	1					84					
35								85					
36								86					
37								87					
38								88					
39								89					
40								90					
41								91					
42								92					
43								93					
44								94					
45								95					
46								96					
47								97					
48								98					
49								99					
50								100					
TOTAL IND.	1		↓		↓		↓		↓		↓		↓
TOTAL DEP.	32	←		←		←	←		←		←		←
TOTAL CLAIMS	33	[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]		[REDACTED]	

Best Available Copy